DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: JERMAN ADULT FAMILY HOME (0009902)

Address: 10662 GATEWAY AVE, SPARTA, WI 54656

License Status: REGULAR

Licensed/Certified/Registered 11/19/2002

Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History

Survey ID: 0094277 End Date: 01/05/2005 Type: OTHER Purpose: VERIFICATION VISIT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0093860 End Date: 12/07/2004 Type: STANDARD Purpose: SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10009801 Served 12/16/2004

Compliance

Deficiencies Cited
88.05(3)(d)Subject Area
ANNUAL WELL WATER INSPECTIONSVerified
12/29/2004Corrected
Yes

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